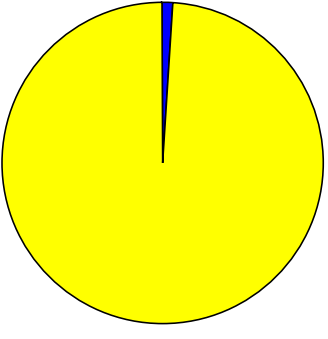


# Fairfax-Falls Church Community Services Board

## 106-02-CSB Prevention Services

Fund/Agency: 106		Fairfax-Falls Church Community Services Board
Personnel Services	\$1,094,218	<p style="text-align: center;"><b>CAPS Percentage of Agency Total</b></p>  <p style="text-align: center;">1.1%</p> <p style="text-align: center;">98.9%</p> <p style="text-align: center;"> <span style="color: blue;">■</span> CSB Prevention Services              <span style="color: yellow;">■</span> All Other Agency CAPS         </p>
Operating Expenses	\$105,285	
Recovered Costs	\$0	
Capital Equipment	\$0	
<b>Total CAPS Cost:</b>	<b>\$1,199,503</b>	
Federal Revenue	\$505,800	
State Revenue	\$0	
User Fee Revenue	\$11,028	
Other Revenue	\$0	
<b>Total Revenue:</b>	<b>\$516,828</b>	
<b>Net CAPS Cost:</b>	<b>\$682,675</b>	
Positions/SYE involved in the delivery of this CAPS	20/20	

### ► CAPS Summary

**CSB Prevention Services** provides a comprehensive evidence-based continuum of services to individuals, families, and communities at risk for alcohol, tobacco, and other drug (ATOD) abuse and/or who need mental health services. The goal of the service is to reduce the incidence of substance abuse and the impact of mental health problems in the community. Prevention services are ahead of the curve in the increasing emphasis on research and evidenced-based practices. Our local prevention services are nationally recognized. Programs such as Girl Power, S.T.R.I.K.E., and the Leadership and Resiliency Program directly address key individual and family risk factors through school and neighborhood-based initiatives.

- Prevention Services provides outreach services to individuals and families in crisis reluctant to seek traditional services, and provides the linkage to the appropriate level of care within Alcohol and Drug Services, Mental Health Services, or other appropriate County agencies and private/non-profit providers.

## *Fairfax-Falls Church Community Services Board*

---

- Prevention Services' clients typically do not access traditional treatment services due to a number of factors, which include cultural norms, language barriers, inability to access services due to the nature of a disability, lack of transportation, fear of contact, and economic deprivation.
- Prevention Services reach a diverse population in the community. Programming serves high-risk individuals and families from Central and South America, Asia, and other populations that are recent refugees from war-torn countries. Prevention staff are often the sole service providers in these communities.
- Services are provided in a variety of settings, including schools (Fairfax County and Fairfax City), neighborhoods, public housing, neighborhood resource centers, and County agencies.
- Programming includes services to children, adolescents, adults, families, and older adults. Programming seeks to reduce risk factors associated with alcohol, other drug use, and environmental mental health factors, while supporting resiliency factors in the individual, peers, family, community, school, and workplace.
- Individuals participate in a variety of activities, which include education, information dissemination, problem identification, referral services, alternative activities, and integration of the business community and community-at-large with Federal and State laws related to underage availability of alcohol and tobacco.
- Evidence-based programming, or programming designed and implemented based on research that proves services are effective for similar populations, incorporates a three-pronged approach of education, alternative activities, and community service.
- Intensive youth services are designed to interrupt the cycle of substance abuse, addiction, mental health problems, and violence. Services are provided in communities and schools and include collaborative efforts with the Fairfax County and Falls Church City School systems and Fairfax County Police Department.
- Intensive services are directed to families requiring structured intervention services and linkages to treatment to interrupt addiction within the family, individuals referred by the Courts for domestic violence issues, youth experiencing issues related to depression and suicide, and youth at high risk for continued abuse of alcohol and other drugs.
- The Prevention unit also provides education, information, and alternative programming to individuals, families, schools, businesses, civic groups, and service providers.

All programs are evaluated for effectiveness and programs that do not meet stated goals and objectives are retooled.

Contract Management oversight is provided by CSB Prevention Services staff for Safe and Drug Free School grants distributed through the Governor's Discretionary fund to a number of private providers and faith-based organizations. Oversight includes on-site observations, clinical consultation, financial oversight, review of outcome measures, and coordination of Quality Assurance/Quality Improvement activities.

# *Fairfax-Falls Church Community Services Board*

---

## **Quality Assurance and Staff Development**

For information on CSB's comprehensive Quality Improvement (QI) Plan, Risk Management Plan, and CSB-wide training and staff development initiatives, please refer to the Overview section.

Specific to this CAPS, CSB Prevention Services participates in multi-layered quality assurance activities:

- The Department of Mental Health, Mental Retardation, and Substance Abuse Services (DMHMRSAS) requires through the State Performance Contract that the CSB develop and monitor a comprehensive Quality Assurance Plan. This plan is reviewed and approved annually by members of the Community Services Board.
- Prevention Services also participates in the DMHMRSAS mandated quality assurance activity through the development of the CSB's role in the State Comprehensive Plan. The State Comprehensive Plan includes citizen and key stakeholder feedback related to areas of interest in service development and improvement.
- Additionally, DMHMRSAS mandates through the State Performance Contract that Prevention Services will participate in the Performance Outcome Measurement System (POMS) project. In FY 2003, POMS includes outcome, process, and consumer satisfaction measures.
- Programs conduct client satisfaction surveys and collect measurements on face valid indicators supported by the Center for Substance Abuse Treatment (CSAT) and the Center for Substance Abuse Prevention (CSAP). These face valid indicators include measures for improvements in reduced alcohol/drug use, reduced criminal/antisocial activity, and increased productivity in school or work.

## **Community Outreach**

Prevention Services has participated in numerous Public Service Announcements. Services and model programming have been the subject of a number of local newspaper articles. Prevention Services disseminates extensive educational material to the community regarding prominent issues for youth and their families, such as violence prevention, tobacco cessation, and the risks of drug and alcohol use.

# *Fairfax-Falls Church Community Services Board*

---

## **Accomplishments**

Programming in Prevention has been recognized for excellence at the State and Federal level.

- The Fairfax Leadership and Resiliency Program, a program serving high-risk youth, has received the following honors: a NACo Award in 1999, a Washington Metropolitan Council of Governments Science-Based Prevention Program Award in 2000, and a Governor's Recognition for Excellence in 2000. In addition, in 2001, it was selected as an Exemplary Model Substance Abuse Prevention Program by the Center for Substance Abuse Prevention, citing it as a model for national replication. This program has been consistently cited as an example of successful School-County collaboration.
- Girl Power, a program serving at-risk young females, was nominated as a Promising Program through the Center for Substance Abuse Prevention and received national recognition through a NACo Award in 2001.
- The Leadership and Resiliency and Girl Power Programs have been invited to the National Prevention Network Research Conference 2001, which is considered the preeminent national conference that provides current prevention research findings and proven program models.
- Based on examples of University researched Prevention programming outcomes, Fairfax Leadership and Resiliency students reduced school absenteeism and school disciplinary reports, increased grade point averages by nearly a full point, and increased graduation rates.

## **Funding Sources**

Funding sources include Fairfax County; the Substance Abuse Prevention and Treatment (SAPT) Federal Block Grant; and consultation/education fees.

## **► Trends/Issues**

Prevention Services recently participated in the implementation of the Communities that Care Survey in the Fairfax County School system. Survey respondents (8<sup>th</sup>, 10<sup>th</sup>, and 12<sup>th</sup> graders) indicated high rates of inhalant abuse, binge drinking, and suicide thoughts, gestures, and attempts. The information about drug and alcohol use, suicidality, and violence, in combination with the students' perceived risk and resiliency factors will be used as needs assessment data for future programming designed to intervene and strengthen key indicators.

More individuals and families accessing Prevention Services are from diverse cultures. Services are geographically dispersed throughout the County and staff who have demonstrated cultural competence have been recruited for their expertise in substance abuse and mental health services. Staff members work in a community-based model and are often the sole service providers for high-risk individuals and families from Central and South America, Asia, and other refugee populations from war-torn nations. The recent Human Services Multicultural Report lends evidence of the diversification of the County and will be used as Prevention needs assessment data in determining future programming.

## *Fairfax-Falls Church Community Services Board*

---

State and Federal Prevention funding opportunities require that services are evidence-based and employ proven practices. Funding opportunities have moved to a competition model. New State funding will not be disbursed by formula and will continue to be awarded on evidence-based criteria. Examples of evidence-based programming include the Fairfax Leadership and Resiliency Program, Girl Power, services to at-risk elementary school youth, after-school programming for at-risk/high-risk youth, services to at-risk elderly, and community Prevention programming with high-risk individuals and families from Central and South America, Asia, and other refugee populations from war-torn nations.

The State Department of Mental Health, Mental Retardation and Substance Abuse Services (DMHMRSAS) has developed a new web-based state tracking system for Prevention data. Prevention Services is implementing the system, which will also be used to monitor program goals, objectives, and activities, resulting in standardized program evaluation information.

### **Participant Characteristics**

Individuals and families accessing services through CSB Prevention Services are diverse. Culturally competent staff serve at-risk and high-risk populations from Central and South America, Asia, and war-torn nations. Programming also services at-risk and high-risk communities throughout the County. Populations served are at-risk or high-risk for substance abuse/addiction, mental health problems, and violence. Individuals, families, and communities served don't tend to seek traditional substance abuse and mental health programming services for a variety of factors (culture, fear, and socioeconomic conditions). Universal Prevention programming participants include the community as a whole, businesses, and civic groups. Selected (at-risk/high-risk populations/communities) and indicated (high-risk individuals and families) Prevention programming participants include children, adolescents, adults, and elderly at high risk or using/abusing alcohol and other drugs and/or experiencing mental health problems.

The Federal Government (45 CFR - Special Federal Substance Abuse Prevention and Treatment Block Grant) and DMHMRSAS mandate the operation of Prevention Services as one component on the continuum of treatment services. Federal set aside regulations require that 20 percent of each state's allocation of the Substance Abuse Prevention and Treatment Block Grant (SAPT) be allocated to prevention services.

In previous exercises, CSB Prevention activities were included separately within the Mental Health and Alcohol and Drug Services program areas. CSB Prevention Services is presented as a separate CAPS to reflect the cross-agency nature of the current programming.

### **► Method of Service Provision**

Prevention Services are provided through a combination of directly operated and limited contracting services with discretionary grant funding. The discretionary grant funding provides selected Girl Power! Prevention services throughout the County.

Hours of Operation: Prevention Services are provided as needed by the community and/or population being served. Standard hours of operation are Monday through Friday from 8:00 a.m. until 8 p.m. Many activities and events are provided at night, on weekends, and/or whenever groups and community organizations are available and choose to meet.

# Fairfax-Falls Church Community Services Board

## ► Performance/Workload Related Data

Title	FY 1998 Actual	FY 1999 Actual	FY 2000 Actual	FY 2001 Actual	FY 2002 Estimate
Hours of Service	16,915	15,994	12,314*	20,989**	21,000

\* Reduction in hours of services related to management information system (MIS) data issues

\*\* Increased hours related to additional staff/programming associated with the Leadership and Resiliency Program

Satisfaction Results: 95 percent of clients participating in Prevention Services' education activities report satisfaction with services.

## ► Mandate Information

This CAPS is Federally or State mandated. The percentage of this CAPS' resources utilized to satisfy the mandate is 76 - 100%. The specific Federal or State code and a brief description of the code follows:

- Federal Substance Abuse Prevention and Treatment Block Grant 45 CFR (Code of Federal Regulations) 96 Sections 1921 to 1954 of the Public Health Services (PHS) Act, 42 U.S.C. §§ 300x-21- 300x-35 requires that funding agreements with the States be established for the purposes of prevention and treatment of substance abuse.

## ► User Fee Information

Subobject Code	Fee Title	FY 2002 ABP Fee Total
N/A	FY 2002 CSB Schedule of Fees. The current fee schedule is available in the Agency Overview.	\$11,028
<b>Current Fee</b>		<b>Maximum Allowable Fee Amount</b>
Fees are for consultation and education services provided to the community.		N/A
<b>Purpose of Fee:</b> Fees are charged to offset the cost of providing treatment services.		
Levy Authority	Requirements to Change the Fee	Year Fee Was Last Adjusted
CSB Policy on Reimbursement  <u>Code of Virginia</u> Chapter 10, 37.1-197(7)	The CSB Schedule of Fees is reviewed and established annually by the CSB Board and submitted to the Board of Supervisors.  Prevention fees are set rates with the individual/family/organization responsible for the full fee.	2001
<b>Other Remarks:</b>		